

MI PCMH Initiative Practice Transformation Collaborative

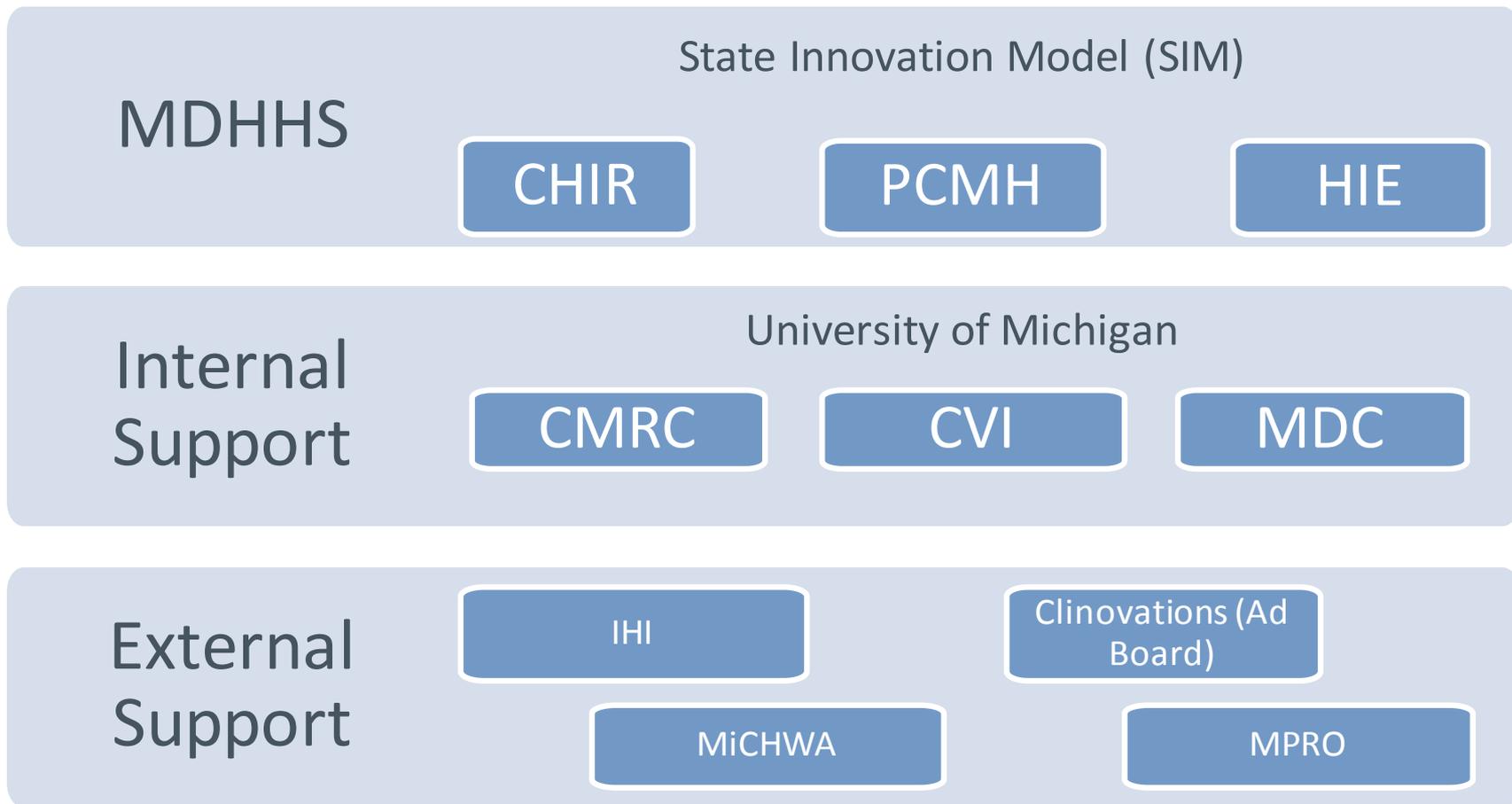
Webinar #2



April 13, 2017



SIM PCMH Initiative Team Structure





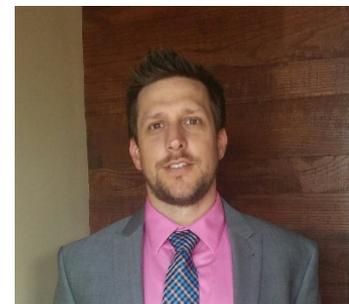
The MDHHS PCMH Initiative Team



Katie Commey, MPH
PCMH Initiative Coordinator



Phillip Bergquist
Policy & Strategic Initiatives Manager



Justin Meese
Sr. Business Analyst



The PCMH Initiative Internal Support Team



Amanda First
CVI Analyst



Diane Marriott
CVI Director



Veralyn Klink
CVI Administrator



Marie Beisel, MSN, RN, CPHQ
Sr. Project Manager - CMRC



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Project Manager - CMRC



Susan Stephan
Sr. System Analyst - MDC



The IHI Support Team



Sue Butts-Dion
Improvement Advisor



Sue Gullo, RN, BSN, MS
Director



Trissa Torres, MD, MSPH, FACPM
Chief Operations and North
America Programs Officer



Tam Duong, MS
Project Manager



Julia Nagy
Project Coordinator



Instructions for Using WebEx

To log-in, dial-in, and view materials:

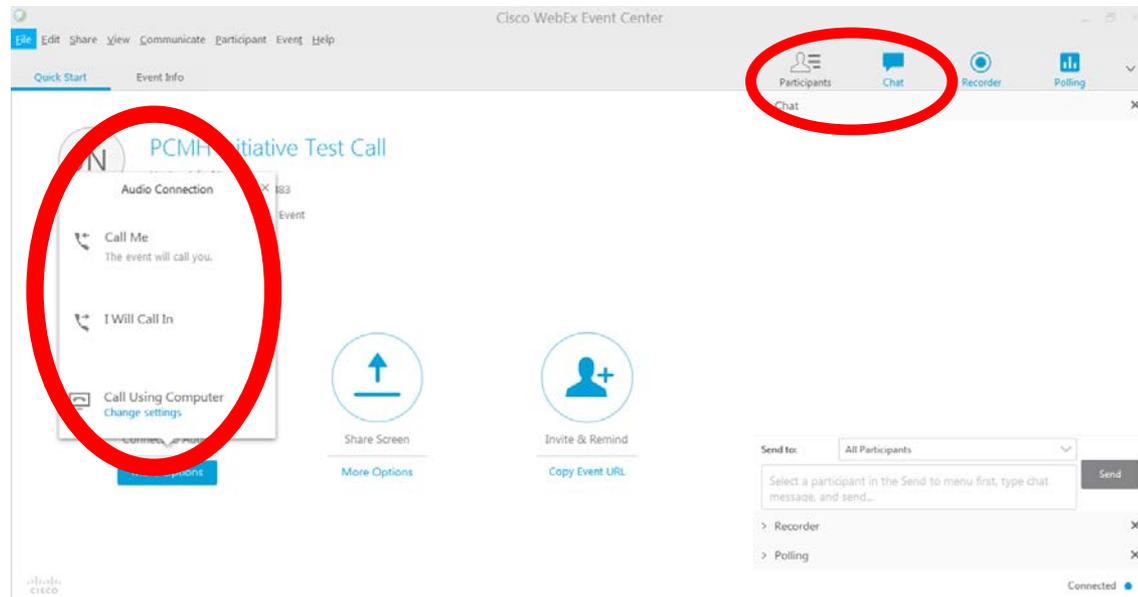
1. Go to <http://ihi.webex.com> (Note: There is no “www” in the address)
2. On the navigation bar, select **Event Center > Attend a Session > Live Sessions** to view a list of links.
3. Click “Join” or “Register” next to the event titled the topic listed above.
4. Enter your name and email address in the boxes on the right, then click “**Join Now.**”
5. After the WebEx loads, a pop-up box that says “**Audio Conference**” will appear.
6. Please call in using the dial-in provided. **Use both the access code and attendee ID to dial in.**
7. Upon sign-in, please type your full name and organization into the chat box.



Phone Connection (Preferred)

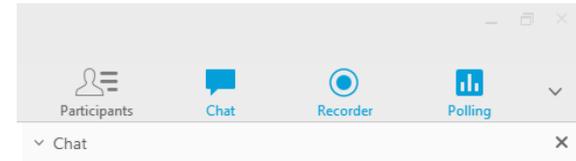
To join by **phone**:

- 1) Click on the “Participants” and “Chat” icon in the top, right hand side of your screen to open the necessary panels
- 2) You can select to call in to the session, or to be called. If you choose to call in yourself, please dial the **phone number**, the **event number** and your **attendee ID** to connect correctly.



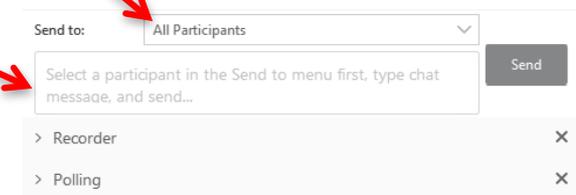
WebEx Quick Reference

- Please use chat to “**All Participants**” for questions
- For technology issues only, please chat to “**Host**”



Select Chat recipient

Enter Text



Connected ●

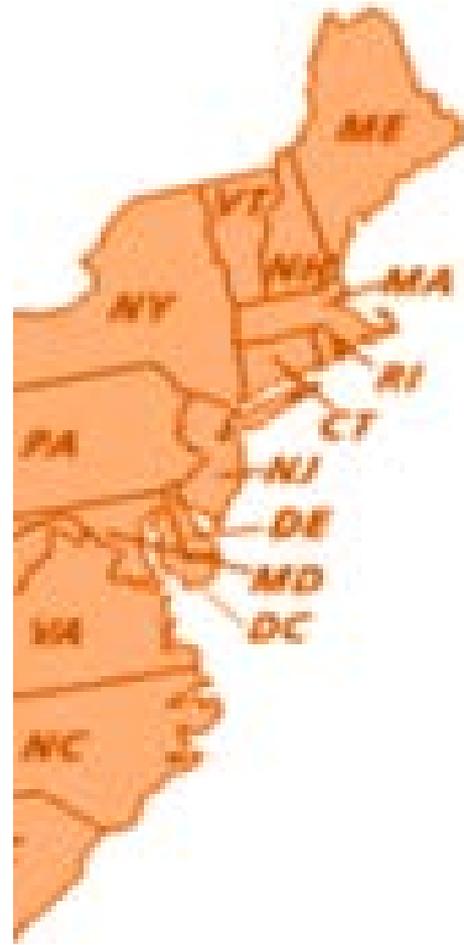


Agenda

- Welcome
- Celebrating Learning Session 1
- What did you test by last Tuesday?
- Breaking down systems into processes that you can test!
- Q & A



Where are you joining from? ¹⁰





Aim

The purposes of the PCMH Initiative are:

1. To foster the transformation of participating PCMH primary care practices to enable interventions that impact all persons served by the Practice in a cost-effective manner using evidence-based guidelines and practices
2. To support a premier model for advanced primary care in Michigan leveraging experience gained from the MiPCT demonstration, and
3. To improve health outcomes, improve patient experience of care, and reduce preventable healthcare costs.



If you want to go fast,
go alone.

If you want to go far,
go together.

- African Proverb -



Raise your hand...

Who was at
Learning
Session 1?



Celebrating Learning Session 1!

- **April 3, 2017- Day 1**

- **Morning session: 8:30 AM - 12:15 PM**

- What is it we are trying to accomplish? Creating the “Wall of Aims”
 - Setting the Context: Through the Patient's Eyes “What Matters to Me?”

- **Afternoon session: 1:15 PM - 4:30 PM**

- Building Clinical Community Linkages

- **April 4, 2017- Day 2**

- **Morning session: 8:30 AM - 12:15 PM**

- Building a Patient Centered Medical Home and the Team: The Journey After Designation
 - Beginning our Work with the End in Mind

- **Afternoon session: 1:15 PM - 4:30 PM**

- What changes can we make that will result in improvement ?
 - Leaving in Action: Developing First Plan-Do-Study-Act Cycles



Categories

- Community-Clinical Linkages 
- Population Health Management -Knowing & Co-Managing Patients
- Telehealth Adoption
- Group Visits
- Patient Portal
- Improvement Plans from Patient Feedback
- Self Management Monitoring & Support
- Integrate Peer Support
- Medication Management
- Integrated Clinical Decision Making
- Care Team Review of Patient Reported Outcomes
- Cost of Care Analysis



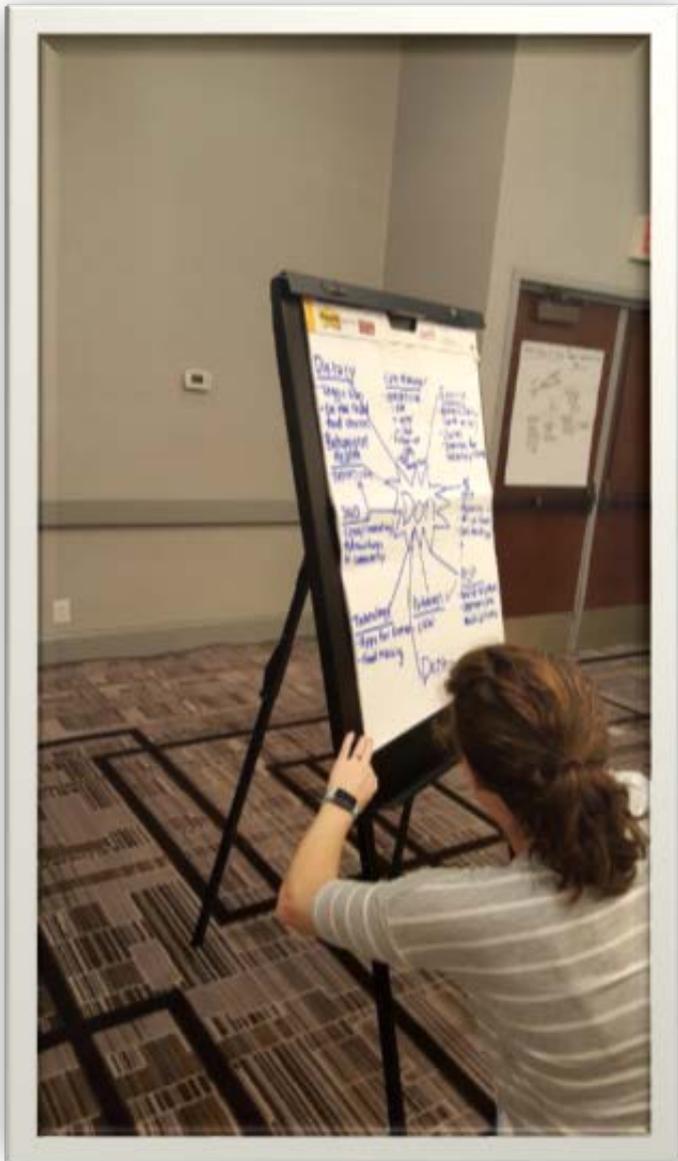


Clinical-Community Linkages

A Patient
Centered Medical
Home (PCMH)
without a
neighborhood.











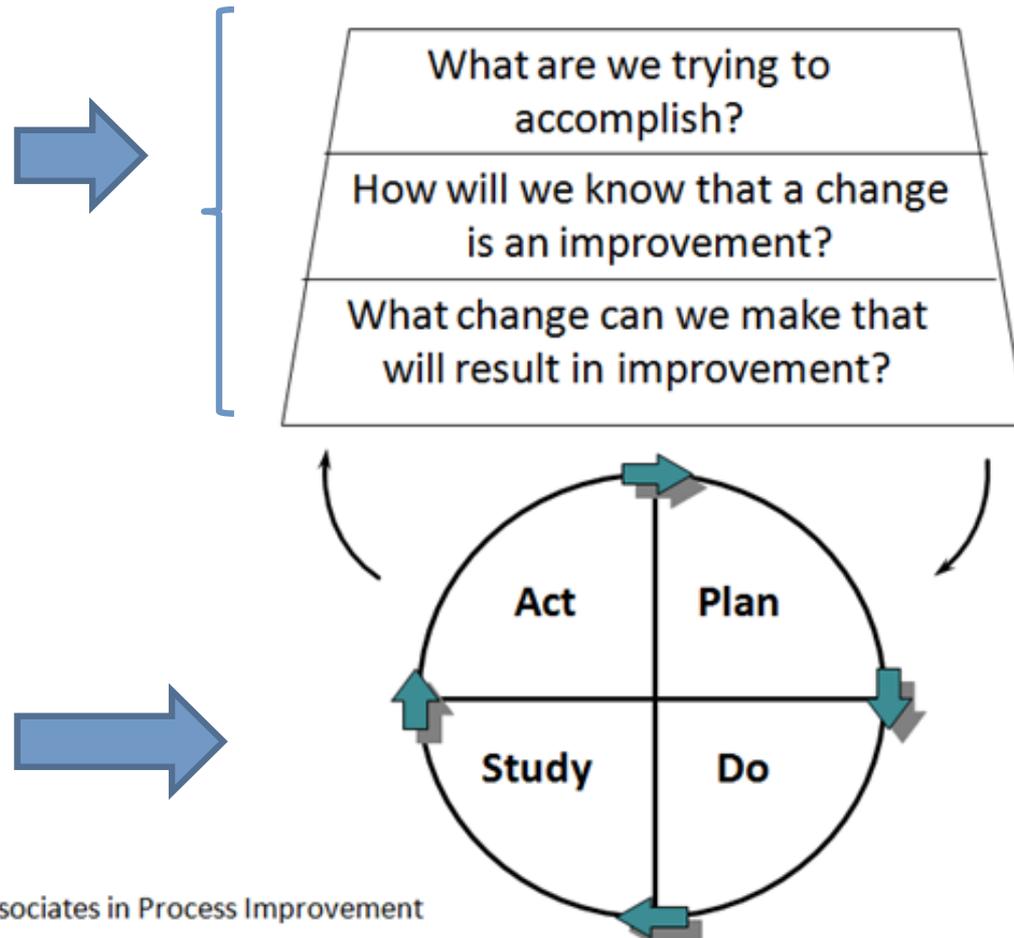






“All improvement requires change, but not all change is an improvement...”

Model for Improvement



We use the Model for Improvement to increase the odds that changes will lead to improvement and to accelerate change!



Final word...

Thoughtful
 Overwhelming
 Potential Dynamic Educational
 Hectic Enthusiasm Thankful
 Enlightening Excellent Light
 Grappling Awesome Interactive Lovely

Informative

Thanks Motivating Interesting
 Inspiring Change Patient-centered
 Wonderful
 Knowledge Overload

Collaborative



Leaving in Action

- What did you test by Tuesday?



Flowcharts

A Helpful Diagram for Exploring Systems
and Understanding Processes

Sue Butts-Dion, Improvement Advisor



Flowcharts

- Pictures of steps in a process
- Purpose
 - Examine the order of the steps
 - Identify inefficiencies in the process
 - Create common understanding of the process flow
 - Train workers in a process
 - Help clarify complex processes
 - Identify value and non-value added steps
 - Create shared understanding of process
 - Basis for designing new flow

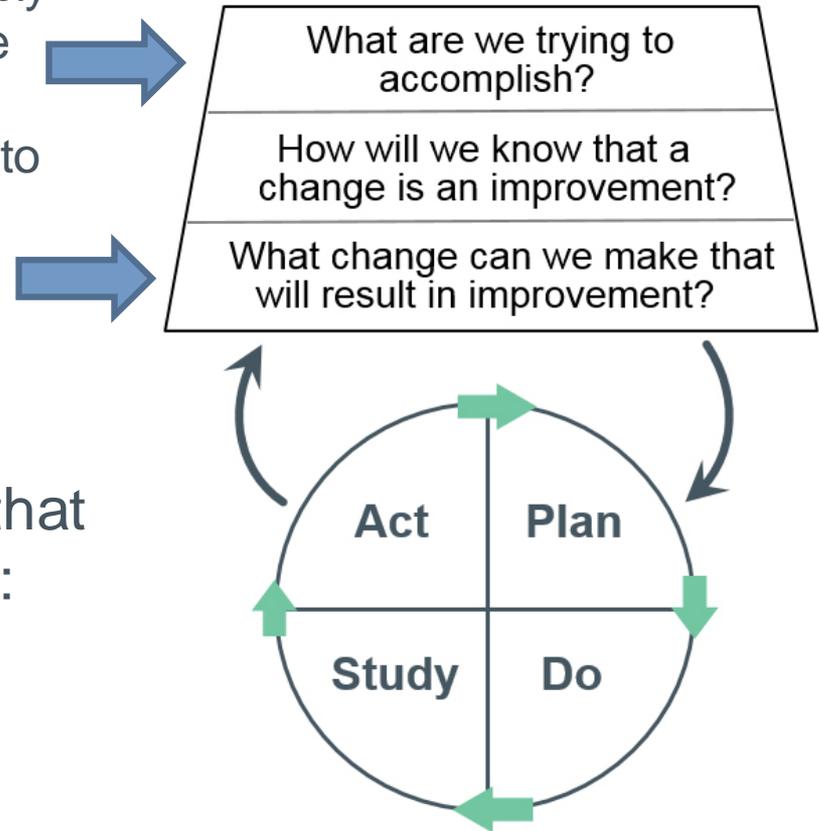


Especially useful...

Learning Community participants will apply the Model for Improvement to accelerate change in their local environments and learn to embed improvement methods into their day-to-day work.

- **Aims** (What are we trying to accomplish?)
- **Measures** (How will we know that a change is an improvement?):
- **Improvement Ideas** (What changes can we make that will result in improvement?)

Model for Improvement



Value of Flowcharts to you...

- Sketch out a brand new process if you have nothing in place
 - If no process in place to do a brief SDoH assessment
- Sketch out your existing process and look for improvement or ways to build improvement into existing processes
 - Already do an assessment but want to improve



High-Level Flowchart (Block Diagram)

- Simplest form of process description.
- Helps establish boundaries for the process, see complexity, see handoffs and foster conversation.
- Especially useful early in life of team —when trying to figure out their current process.



High-Level Flowchart (Block Diagram) – How

1. Get the right people in the room
2. Identify the major process steps
3. Write them in the order they occur (usually done horizontally so information can be hung below the major process steps but not always)
4. If there are more than eight, process might be too complex
5. Choose another process or a subset of the major steps

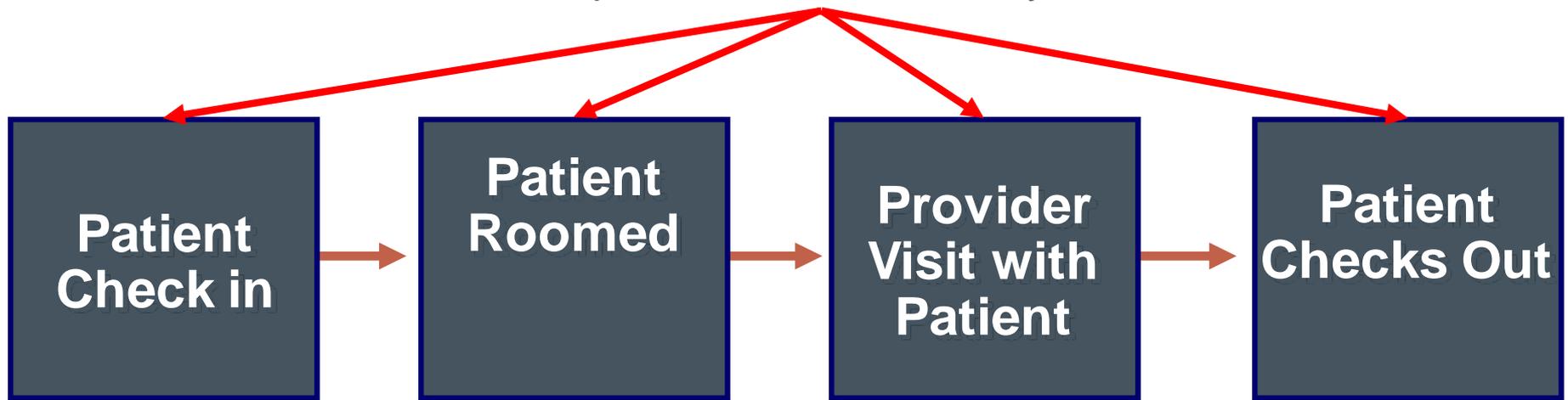


Insert example



High-Level Flowchart: *Annual Physical*

Step 1: Identify big “buckets” or work—
present them horizontally

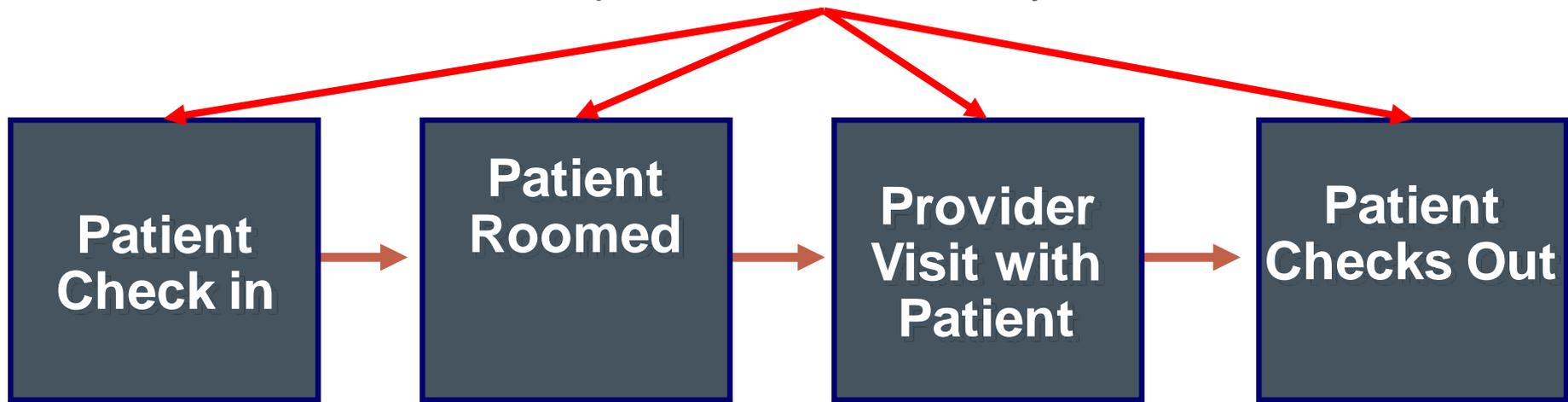


Step 2: Hang specific steps related to the bigger “buckets” of work underneath appropriate step, vertically as well as initial barriers.



High-Level Flowchart: *Annual Physical*

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present them horizontally



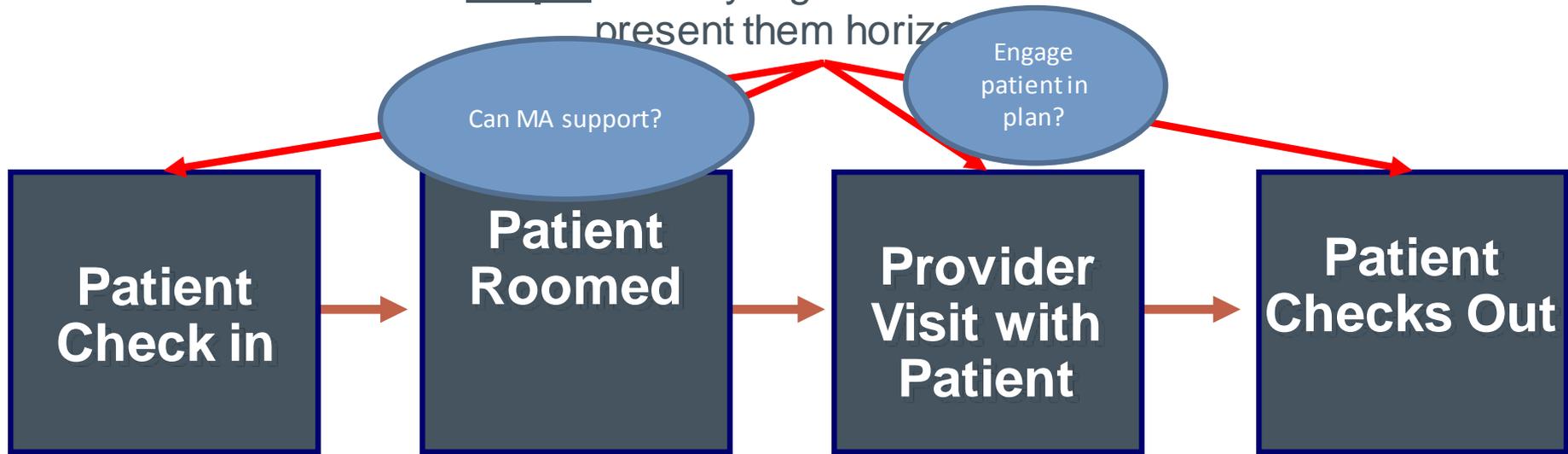
Step 2: Hang specific steps related to bigger “buckets” of work underneath appropriate step, vertically as well as initial barriers.

Step 3: For each step, ask:

- Can it be eliminated?
- Can it be done in a different order?
- Can it be done by someone else—more appropriate person?
- Are there unnecessary waits?
- Communication breakdowns?
- Is this value added for the patient?
- Is this value added for the staff?

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Flowcharts



Your ideas for using flowcharts?

- Formulate any questions you might have for peer coaching calls.
- Find more information and links to resource on IHI website:
<http://www.ihl.org/resources/Pages/Tools/Flowchart.aspx>

Questions?



Next Steps

Action Period Calls

- May 11, 2017 from 4:00 – 5:00 PM ET
- June 8, 2017 from 4:00 – 5:00 PM ET

Topic: Check in call in follow-up to Learning Session & Prepare for in-person Learning Session 2 (June 2017)

Peer Coaching Calls

- May 16-19, 2017 from 12:00 – 1:30 PM ET



Questions

